Fill in this information to identify your case:
United States Bankruptcy Court for the:
Eastern District of New York
Case number (If known):  Chapter you are filing under:  Chapter 7  Chapter 11  Chapter 12  Chapter 13

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that is on your	Debrah	
government-issued picture identification (for example, your	First name	First name
driver's license or passport).	Middle name	Middle name
Bring your picture identification to	Sarria	
your meeting with the trustee.	Last name	Last name
	Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
All other names you have used		
in the last 8 years	Debrah First name	First or any
Include your married or maiden		First name
names.	Sarria Middle name	Middle name
	Herrera	whole hame
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
Only the last 4 digits of your Social Security number or	xxx-xx- <u>2</u> <u>9</u> <u>6</u> <u>2</u>	xxx-xx
federal Individual Taxpayer	OR	OR
Identification number (ITIN)	9xx - xx	9xx - xx

Deb	tor 1 <b>Debrah</b>	Sarria	Case number (if known)
	First Name	Middle Name Last Name	Caco Harrison (in Michin)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have	■ I have not used any business names or £livs.	☐ I have not used any business names or EINs.
	in the last 8 years Include trade names and do business as names	Business name ning	Business name
		Business name	Business name
		EIN	<u> </u>
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		32-34 44 Street Apt.3R	
		Number Street	Number Street
		·	-
		Astoria, NY 11103	
		City State ZIP Code	City State ZIP Code
		Queens	
		County  If your mailing address is different from the one above, fi it in here. Note that the court will send any notices to you at this mailing address.	County  If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.
		uno manng address.	to you at this maining address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing to		Check one:
	district to mo 15. Building	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)

Debt		Sarria	Case number (if known)	_
	First Name	Middle Name Last Name		
Par	t 2: Tell the Court About Yo	ur Bankruptcy Case		
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each (Form B2010)). Also, go to the top of page   Chapter 7  Chapter 11  Chapter 12  Chapter 13	n, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 1 and check the appropriate box.	
8.	How you will pay the fee	about how you may pay. Typically, if you order. If your attorney is submitting your a pre-printed address.  I need to pay the fee in installments. Your Filing Fee in Installments (Official I request that my fee be waived (You but is not required to, waive your fee, at that applies to your family size and you	petition. Please check with the clerk's office in your local court for more details are paying the fee yourself, you may pay with cash, cashier's check, or money r payment on your behalf, your attorney may pay with a credit card or check with lif you choose this option, sign and attach the <i>Application for Individuals to Pay</i> Il Form 103A).  may request this option only if you are filing for Chapter 7. By law, a judge may, and may do so only if your income is less than 150% of the official poverty line are unable to pay the fee in installments). If you choose this option, you must fill the 7 Filing Fee Waived (Official Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the last 8 years?	Yes. District  District  District	MM / DD / YYYY	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Yes. Debtor District Debtor District	When Case number, if known Relationship to you	
11.	Do you rent your residence?	No. Go to line 12.  Yes. Has your landlord obtained an expension of this bankruptcy petition.	viction judgment against you? It About an Eviction Judgment Against You (Form 101A) and file it as part	

Debt	tor 1	Debrah				Sarria						Case num	nber (if knowi	n)		
	1	First Name	Mid	dle Nar	me	Last N	ame									
Par	t 3: Report A	About Any Busin	esse	es Yo	ou Ow	n as a Sole	e Pro	oprieto	r							
12.		proprietor of any	_		So to Pa											
	full- or part-tir		ч	Yes. N	Name a	and location of	busin	ess								
	you operate as not a separate I	orship is a business an individual, and is egal entity such as artnership, or LLC.		Name	of bus	iness, if any										
	If you have more proprietorship, sheet and attac			Numb	er	Street										
				City						- ————————————————————————————————————		ZIP Code				
				Chec	k the a	ppropriate box	c to de	escribe vo	our bus	iness:						
				_		Care Business		-			7A))					
				_		Asset Real Est										
				☐ s	Stockbr	oker (as define	ed in 1	1 U.S.C.	§ 101(	53A))	, ,,					
					Commo	dity Broker (as	defir	ned in 11 l	U.S.C.	§ 101(6))						
					lone of	the above										
	of the Bankru you a small bu For a definition debtor, see 11 U	under Chapter 11 otcy Code and are siness debtor? of small business J.S.C. § 101(51D).	dea ope 11 U	rations J.S.C. No. No. Yes.	. If you s, cash- § 1116 I ar I ar Bar I ar Coo		ou are t, and der Ch Chapt Chapt	e a small t I federal in napter 11. eer 11, bu	ousines ncome tlam N	s debtor, yo dax return of IOT a small small busir	u must : f any c busine	attach your r of these docu	most recent burnents do no coording to the	palance shot exist, fol ne definition	neet, stateme flow the prod on in the	ent of cedure in
				No.												
14.	Do you own o property that p alleged to pos	ooses or is e a threat of		Yes.	What	is the hazard?	? _									
	imminent and hazard to pub safety? Or do property that i attention?	lic health or			If imn	nediate attentic	on is r	needed, w	hy is it	needed?					_	
	For example, do perishable good must be fed, or needs urgent re	ds, or livestock that a building that			Wher	re is the proper	rty?	Number		Street						
								City					State		ZIP Code	

Debtor 1	Debrah				Sarria			Case numb	oer (if known)
	First Name	Mid	ddle N	lame	Last Name				
Part 5: Exp	lain Your Efforts to	Rec	eive	a Briefii	ng About Credit Counseling				
art J. Lxp	iam rour Emorts to	Nec	CIVE		ng About Credit Counseling				
have rece	ourt whether you eived a briefing dit counseling.	Abo	ut De	btor 1:		Abo	ut Del	btor 2 (Spous	se Only in a Joint Case):
	equires that you	You	mus	t check one:		You	musi	t check one:	
counseling bankruptcy	oriefing about credit g before you file for y You must truthfully of the following	₫	agei	ncy within th	fing from an approved credit counseling e 180 before I filed this bankruptcy petition, certificate of completion.		ager	ncy within the	fing from an approved credit counseling e 180 before I filed this bankruptcy petition, certificate of completion.
choices. If	you cannot do so, you gible to file.				f the certificate and the payment plan, if veloped with the agency.				f the certificate and the payment plan, if veloped with the agency.
dismiss yo	nyway, the court can our case, you will lose iling fee you paid, and		agei	ncy within th	fing from an approved credit counseling e 180 days before I filed this bankruptcy not have a certificate of completion.		ager	ncy within the	fing from an approved credit counseling e 180 days before I filed this bankruptcy not have a certificate of completion.
your credit	tors can begin activities again.			ST file a cop	after you file this bankruptcy petition, you y of the certificate and payment plan, if			ST file a cop	after you file this bankruptcy petition, you y of the certificate and payment plan, if
		app duri circ	roved agence ng the 7 days	ked for credit counseling services from an cy, but was unable to obtain those services s after I made my request, and exigent nerit a 30-day temporary waiver of the		I certify that I asked for credit counseling services approved agency, but was unable to obtain those during the 7 days after I made my request, and exig circumstances merit a 30-day temporary waiver of requirement.			
			atta to of befo	ch a separate brain the brief or the brief of the brief o	day temporary waiver of the requirement, te sheet explaining what efforts you made efing, why you were unable to obtain it for bankruptcy, and what exigent required you to file this case.		attac to ol befo	ch a separat otain the brie ore you filed f	day temporary waiver of the requirement, te sheet explaining what efforts you made efing, why you were unable to obtain it for bankruptcy, and what exigent required you to file this case.
			with	-	be dismissed if the court is dissatisfied ns for not receiving a briefing before you otcy.		with	-	be dismissed if the court is dissatisfied ns for not receiving a briefing before you otcy.
			rece You alor	eive a briefir I must file a ng with a cop	atisfied with your reasons, you must still ng within 30 days after you file. certificate from the approved agency, py of the payment plan you developed, if ot do so, your case may be dismissed.		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.		
					of the 30-day deadline is granted only for nited to a maximum of 15 days.				of the 30-day deadline is granted only for nited to a maximum of 15 days.
				not require	d to receive a briefing about credit				d to receive a briefing about credit
				•	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			=	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
				Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.			Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
				Active duty	y. I am currently on active military duty in a military combat zone.			Active duty	I am currently on active military duty in a military combat zone.
			abo	ut credit cou	ou are not required to receive a briefing unseling, you must file a motion for waiver eling with the court.		abo	ut credit cou	ou are not required to receive a briefing unseling, you must file a motion for waiver eling with the court.

Debt	tor 1	<b>Debrah</b> First Name	Middle I	Name		arria ast Name		Cas	e number	(if known)
		T iist Name	Wildale I	vamo	_	astranic				
Par	t 6: Answe	r These Question	s for R	eporting	Purpo	oses				
16.	What kind o	f debts do you	16a.					r debts? Consumer debts are defi , family, or household purpose."	ned in 11 l	J.S.C. § 101(8) as "incurred by
					io to lin	e 16b.				
				Yes. 0	3o to lir	ne 17.				
			16b.	<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
				☐ No. G	io to lin	e 16c.				
				Yes. 0	3o to lir	ne 17.				
			16c.	State the ty	pe of d	lebts you owe	that	are not consumer debts or busines	ss debts.	
17.	Are you filing	g under Chapter 7?		No. I am	not filir	ng under Cha <sub>l</sub>	oter 7	7. Go to line 18.		
	exempt proper administrative that funds with the second control of	nate that after any erty is excluded and e expenses are paid ill be available for to unsecured	<b>₫</b>		nses a			o you estimate that after any exem will be available to distribute to un		
18.	How many ci	reditors do vou	<b>√</b>	1-49		1,000-5,000		25,001-50,000 50,0	00-100.000	0 ☐ More than 100,000
10.	8. How many creditors do you estimate that you owe?			50-99		5,001-10,000			,	
	How many creditors do you estimate that you owe?			100-199		10,001-25,0				
				200-999		,				
19.		o you estimate your	$\mathbf{\Lambda}$	\$0-\$50,000	)			\$1,000,001-\$10 million		\$500,000,001-\$1 billion
	assets to be	worth?		\$50,001-\$1	100,000	)		\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion
				\$100,001-\$	\$500,00	00		\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion
				\$500,001-	\$1 millio	on		\$100,000,001-\$500 million		More than \$50 billion
20.		o you estimate your	<b>√</b>	\$0-\$50,000	)			\$1,000,001-\$10 million		\$500,000,001-\$1 billion
	liabilities to b	pe?		\$50,001-\$1	100,000	)		\$10,000,001-\$50 million		\$1,000,000,001-\$10 billion
				\$100,001-\$	\$500,00	00		\$50,000,001-\$100 million		\$10,000,000,001-\$50 billion
				\$500,001-	\$1 millio	on		\$100,000,001-\$500 million		More than \$50 billion
Par	t 7: Sign Be	elow								
For	you			' '			•	Ity of perjury that the information p		
								it i may proceed, if eligible, under oter, and I choose to proceed under		11,12, or 13 of title 11, United States 7.
								to pay someone who is not an atto	rney to hel	p me fill out this document, I have
						d by 11 U.S.C	•	. ,	in thin notit	ion
		•				•		United States Code, specified in the specified in th	•	ion.  d in connection with a bankruptcy case
								up to 20 years, or both. 18 U.S.C.		
		<b>X</b> /	s/ <u>De</u> bra	h Sarria						
		• -		arria, Debtoi	1					
		Ex	recuted c	on <u>09/17/20</u> MM/ [	19 DD/ YY	<del>/YY</del>				

Debtor 1	Debrah		Sarria	Case number (if known)
	First Name	Middle Name	Last Name	
•	• •	under Chapter 7, 11 which the person is	, 12, or 13 of title 11, United eligible. I also certify that I I 707(b)(4)(D) applies, certify	etition, declare that I have informed the debtor(s) about eligibility to proceed I States Code, and have explained the relief available under each chapter for nave delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, y that I have no knowledge after an inquiry that the information in the schedules
		X /s/.lacquelin	e Torchin-Carey	D
		• ———	chin-Carey, Attorney	Date <u>09/17/2019</u> MM / DD / YYYY
		Jacqueline To Printed name  Jacqueline To Firm name  200 Park Ave Number  New York City	orchin, P.C.	NY 10166-0005 State ZIP Code
		•	(800) 541-0635	Email address <b>jcarey@careylegal.org</b>
		5107		NY
		Bar number		State

				_	
Fill in this inform	ation to identify your case and the	nis filing:			
Debtor 1	Debrah		Sarria		
	First Name N	/liddle Name	Last Name		
Debtor 2					
(Spouse, if filing	g) First Name N	/liddle Name	Last Name		
United States B	ankruptcy Court for the:	E	astern District of New York		<b>0</b>
Case number					Check if this is an amended filing
Official Fo	orm 106A/B			_	
Schedul	e A/B: Property	У			12/15
☑ No. Go t	o Part 2.	interest in any	residence, building, land, or similar pro	perty?	
Yes. Who	ere is the property?	\A/l- a4	in the manager 2 O		
Street a	address, if available, or other otion	Si	is the property? Check all that apply.  ngle-family home  uplex or multi-unit building	amount of any secured cl	aims or exemptions. Put the aims on Schedule D: ims Secured by Property.
		— 🔲 м	ondominium or cooperative anufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		La La	nd vestment property		
City	State ZIF	Ouc	meshare	Describe the nature of yo	our ownership interest (such
		O	her	as fee simple, tenancy by	the entireties, or a life
County		Who	has an interest in the property? Check o	estate), if known. ne.	
		☐ De	ebtor 1 only		
		_	ebtor 2 only	<b></b>	
		<b>□</b> D∈	ebtor 1 and Debtor 2 only	Check if this is comn	nunity property

(see instructions)

\$0.00

Official Form 106A/B Schedule A/B: Property page 1

☐ At least one of the debtors and another

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages

you have attached for Part 1. Write that number here.....

Deb	tor 1	<b>Debrah</b> First Name	Middle Name	Sarria Last Name	Case number (if known)	)
Par	rt 2: Des	cribe Your Vel	nicles			
you 3.	own that sor	meone else drives.	. If you lease a vehicle, al sport utility vehicles, m	so report it on Schedule G: Executo  otorcycles  Tho has an interest in the property	gistered or not? Include any vehicles any Contracts and Unexpired Leases.  7 Check one.  Do not deduct secured class.	aims or exemptions. Put the
	Model: Year:		2000	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and	Current value of the	aims on Schedule D: ims Secured by Property.  Current value of the portion you own?
	• •	imate mileage: nformation:		Check if this is community proper instructions)	\$2,600.00	\$2,600.00
	Examples:  No Yes  Add the do you have a	Boats, trailers, mo	otors, personal watercraf	recreational vehicles, other vehicles, fishing vessels, snowmobiles, moon of your entries from Part 2, include	torcycle accessories ing any entries for pages	<b>→</b> \$2,600.00
Do	you own o	r have any legal c	or equitable interest in a	ny of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examples:	goods and furni Major appliances	shings s, furniture, linens, china, Household goods and			\$2,500.00
	Electronics Examples:	Televisions and r		eo, and digital equipment; computer cameras, media players, games	rs, printers, scanners; music collections;	
	☐ No ☑ Yes. De:	scribe	Electronics			\$400.00
	Collectibles Examples:	Antiques and figu		or other artwork; books, pictures, or other collections, memorabilia, coll		
	☑ No ☐ Yes. De	scribe				] ———

Deb	otor 1	Debrah	Sarria	Case number (if known)	
		First Name	Middle Name Last Name		
9.	Equipment	for sports and h	obbies		
	Examples:		phic, exercise, and other hobby equipment; bicycles, pool tables, golf musical instruments	clubs, skis; canoes and kayaks;	
	<b>√</b> No	. , ,			
	_	scribe			
10.	Firearms				
10.		Pistols rifles s	hotguns, ammunition, and related equipment		
	✓ No	r iotolo, riiioo, oi	Total of a state of the state o		
		escribe			
11	Clothes				
11.		Even day deth	es, furs, leather coats, designer wear, shoes, accessories		
		Everyday cloth	es, ruis, realiter coals, designer wear, shoes, accessories		
	☐ No ✓ Yes D	escribe	Clothes		\$500.00
	- 100. 2	0001100			_
40					
12.	Jewelry	F		muundahan mara salal sikum	
	Examples:	Everyday jeweir	y, costume jewelry, engagement rings, wedding rings, heirloom jewel	ry, watches, gerns, gold, sliver	
	✓ No □ ves D	escribe			
	<b>—</b> 163. D	escribe			
13.	Non-farm	animale			
10.		Dogs, cats, bire	ds. horses		
	<b>√</b> No				
		escribe			
14.	Any other	personal and ho	usehold items you did not already list, including any health aids yo	ou did not list	
	<b>√</b> No				
	_	escribe			
15	Add the d	ollar value of all o	of your entries from Part 3, including any entries for pages you have	ve attached	
			per here		3,400.00
Do	rt 4: Doc	oribo Vour Ein	ancial Assets		
га	rt 4: Des	cribe rour rin	anciai Assets		
Do	you own o	r have any legal o	or equitable interest in any of the following?	Current value	
				<b>portion you o</b> Do not deduct	
				claims or exem	
	_				
16.					
	Examples:	Money you hav	e in your wallet, in your home, in a safe deposit box, and on hand when	you tile your petition	
	☑ No ☐ Yes			Cash	
	<b>—</b> 168			Casil	

or 1	Debran		Sarria	Case number (if known)	
	First Name	Middle Name	Last Name		
Deposits of	f money				
		or other financial accoun	nts; certificates of deposit: shares	in credit unions, brokerage houses, and other	
			unts with the same institution, list		
☐ No					
<b>√</b> Yes					
		Institution name:			
17.1 Check	ing account:	JPM Chase		\$1,536.00	
17.1. OHECK	ang account.	or w chase		Ψ1,330.00_	
17.2. Check	ring account:				
3110010	g	-			
17.3. Saving	as account:				
	,	-			
17.4. Saving	as account:				
	,				
17.5. Certific	cates of deposit:				
17.6. Other	financial account:				
17.7. Other	financial account:				
17.8. Other	financial account:				
17.9. Other	financial account:				
David	6	abatus da data d			
	tual funds, or publi Bond funds investr	-	rage firms, money market accounts		
✓ No	Dona rando, investi	TOTA GOODALIAS WILLI DI UNG	ago amo, monoy mainer account	•	
Yes					
Institution or	r issuer name:				
Non-public	ly traded stock and	l interests in incornerate	ed and unincorporated business	ses including an interest in	
Non-public an LLC, pa	ly traded stock and	l interests in incorporate t venture	ed and unincorporated business	ses, including an interest in	
an LLC, pa	ly traded stock and rtnership, and join	l interests in incorporate t venture	ed and unincorporated business	ses, including an interest in	
Non-public an LLC, pa	rtnership, and join	l interests in incorporate t venture	ed and unincorporated busines:	ses, including an interest in	
an LLC, pa  ✓ No  ☐ Yes. Given information	rtnership, and join ve specific ion about	l interests in incorporate t venture	ed and unincorporated business	ses, including an interest in	
an LLC, pa  ✓ No  ☐ Yes. Given informate them	rtnership, and join  /e specific tion about	l interests in incorporate t venture			
an LLC, pa  ✓ No  ☐ Yes. Given information	rtnership, and join  /e specific tion about	l interests in incorporate t venture	ed and unincorporated business		

Debt	or 1 l	Debrah	Sarria	Case number (if known)
	Ī	First Name	Middle Name Last Name	
00				
20.	Negotiable insti	ruments include	bonds and other negotiable and non-negotiable instru- e personal checks, cashiers' checks, promissory notes, and	money orders.
	Non-negotiable	instruments a	re those you cannot transfer to someone by signing or deliv	rering them.
	<b>√</b> No			
	Yes. Give s	pecific		
	information them	about		
	Issuer name:			
21.	Retirement or	pension acco	punts	
	Examples: Int	terests in IRA,	ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or	other pension or profit-sharing plans
	<b>√</b> No			
	Yes. List ea separately.	ch account		
	Type of account	t: Ins	stitution name:	
	401(k) or simila	ar pian:		<del></del>
	Pension plan:			
	IRA:	_		
	Retirement acc	ount:		<del></del>
	Keogh:			
	. 1009			
	Additional acco	unt:		
22.	Security depos	sits and prepa	yments	
	Your share of al	I unused depos	sits you have made so that you may continue service or use	from a company
	Examples: Agree	eements with la	andlords, prepaid rent, public utilities (electric, gas, water),	telecommunications companies, or
	✓ No			
	Yes			
		Institutio	on name or individual:	
	Electric:			
	LIOONIO.			<del></del>
	Gas:			
	Heating oil:			
	Security deposi	it on rental unit	-	<del></del>
	Dropoid			
	Prepaid rent:	-		

Debt	_	<b>Debrah</b> First Name	Middle Name	Sarria Last Name	Case number (if known)
	Telephone:				
	Water:				
	Rented furniture	e:			
	Other:				
23.	✓ No ☐ Yes		lic payment of money to	you, either for life or for a nur	umber of years)
	Issuer name an	a description:			
24.	26 U.S.C. §§ 53  No Yes	30(b)(1), 529A(b), 	and 529(b)(1).	ified ABLE program, or und	der a qualified state tuition program.  C. § 521(c):
25.	Trusts, equitab	le or future inter	ests in property (other	than anything listed in line	e 1), and rights or powers exercisable for your
	✓ No ☐ Yes. Give spinformation a	pecific about them			
26.		<u> </u>		ther intellectual property s from royalties and licensing	agreements
	✓ No ☐ Yes. Give sp		, ,,	, ,	
27.	Examples: Bu pro  No Yes. Give sp	ilding permits, ex ofessional license		erative association holdings, I	liquor licenses,
Mone	ey or property o	wed to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.

Debtor 1		Debrah		Sarria		Case number (if known)	
		First Name	Middle Name	e Last Name			
28.	Tax refund	ds owed to you					
	Yes. G	Give specific informationem, including whether				Federal:	
	а	lready filed the returns ax years	and the			State:	
		, y ca. c				Local:	
29.			ım alimony, spous	sal support, child support, mainte	enance, divorce settl	lement, property settlement	
	✓ No ☐ Yes. G	Give specific information	on			Alimony	
						Alimony:  Maintenance:	
						Support:	
						Divorce settlement:	
						Property settlement:	
30.	Other amo	ounts someone owes	you				
	Examples:			ayments, disability benefits, sick ade to someone else	pay, vacation pay, w	vorkers' compensation, Social	
	<b>✓</b> No	No. 2010 10 10 10 10 10 10 10 10 10 10 10 10					1
	Tes. C	Give specific information	J1				
31.		n insurance policies	r life incurance: he	ealth savings account (HSA); cre	adit homeowner's o	or rantar's insurance	
	<b>√</b> No			saint savings account (115A), cit	suit, Horneowner 3, t	or renter's insurance	
		lame the insurance co f each policy and list it		Company name:		Beneficiary:	Surrender or refund value:
			_				
32.	-		-	meone who has died	P	Control of the contro	
	because so	ne beneficiary of a livir omeone has died.	ng trust, expect p	roceeds from a life insurance po	licy, or are currently	rentitied to receive property	
	✓ No ☐ Yes. G	Give specific information	on				]
00	Ol-i-	ata and talk at the state of th	hadhan a	alasa Ciada la Santa de			
33.	_		-	a have filed a lawsuit or made a surance claims, or rights to sue	a demand for paym	nent	
	✓ No	Describe each claim					]
	→ res. L	Describe each ciaim					

Debt	or 1	Debrah		Sarria	Case number (if known).	
		First Name	Middle Name	Last Name		
34.	Other conting to set off clai		idated claims of every natur	e, including coun	terclaims of the debtor and rights	
	<b>√</b> No					
	Yes. Des	cribe each claim	1			
35.	Any financial	assets you did ı	not already list			
	<b>√</b> No					
	Yes. Give	e specific informa	ation			
36.			-		for pages you have attached→	\$1,536.00
	IOI Fail 4. VV	rite triat ritiribe	: nere	•••••	<del></del>	ψ1,330.00
Par	t 5: Descri	be Any Busir	ness-Related Property \	ou Own or Ha	ve an Interest In. List any real estate in Pa	rt 1.
37.	Do you own	or have any lega	al or equitable interest in any	business-related p	property?	
	✓ No. Go to				. ,	
	Yes. Go to	line 38.				
						0
						Current value of the portion you own?
						Do not deduct secured
						claims or exemptions.
38.	Accounts rec	eivable or comm	missions you already earned			
	<b>√</b> No	Г				
	Yes. Desc	cribe				
39.	Office equipr	ment, furnishing	gs, and supplies			
	Examples: E	Business-related	computers, software, modems	s, printers, copiers,	fax machines, rugs, telephones, desks, chairs, electronic	devices
	<b>√</b> No	_				
	Yes. Desc	cribe				
	- 100. 2000					
40.	Machinery, fix	ktures, equipme	ent, supplies you use in busin	ness, and tools of	your trade	
	<b>√</b> No	Г				
	Yes. Desc	cribe				
41.	Inventory					
41.	-					
	<b>✓</b> No					
	Yes. Desc	cribe				
40	Index 4		total and a			
42.	_	partnerships or	joint ventures			
	<b>✓</b> No					
	Yes. Desc	cribe				
	Name of entity	<b>/</b> :			% of ownership:	

Debte	or 1 Debrah	Sarria	Case number (if known)							
	First Name	Middle Name Last Name								
			0/							
			%							
43.	Customer lists, mailing lists, or otl	her compilations								
<b>-10.</b>	No	ici compilations								
		onally identifiable information (as defined in 11 U.S.C	: 8 101/41A)\?							
	✓ No	Stany radianasis information (as defined in 11 c.e.c.	. 3 101(111/9).							
	Yes. Describe									
	_ 100. D0001100									
44	Amy hypinaga valetad preparty yay	did not already list								
44.	Any business-related property you	did not aiready list								
	<b>☑</b> No									
	Yes. Give specific information									
	illioimation									
45.	Add the dollar value of all of your e	entries from Part 5, including any entries for pages ye	ou have attached							
				\$0.00						
Par	Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.									
	If you own or have an interest	in farmland, list it in Part 1.								
46.		quitable interest in any farm- or commercial fishing-re	elated property?							
	☑No. Go to Part 7.									
	Yes. Go to line 47.									
			Current va	due of the						
			portion you							
			Do not dedu							
			claims or ex	lemptions.						
47.	Farm animals									
	Examples: Livestock, poultry, farm-	raised fish								
	☑ No									
	☐ Yes									
48.	Crops—either growing or harves	ted								
	<b>√</b> No									
	Yes. Give specific									
	information									
49.	Farm and fishing equipment, imple	ements, machinery, fixtures, and tools of trade								
	<b>√</b> No									
	☐ Yes									
50.	Farm and fishing supplies, chemic	als, and feed								
	<b>☑</b> No									
	☐ Yes									

Debt	or 1	Debrah		Sarria	Case number (if known)	)				
		First Name	Middle Name	Last Name						
51	Any farm- and	d commercial	fishing-related property you did	not already list						
31.	-	a commercial	naming related property you did	Thot an eady list						
	✓ No ☐ Yes. Give	specific				7				
	informatio	•								
52.	Add the dolla	r value of all o	of your entries from Part 6, inclu	ding any entries for pages yo	u have attached					
	for Part 6. Wi	rite that numb	er here		→	\$0.00				
Par	art 7: Describe All Property You Own or Have an Interest in That You Did Not List Above									
53.	53. Do you have other property of any kind you did not already list?									
55.			country club membership	y list:						
	√ No	•	, ,			7				
	☐ Yes. Give									
	informatio	n								
54.	Add the dolla	ar value of all o	of your entries from Part 7. Writ	e that number here	<b></b> →	\$0.00				
Par	t 8: List th	e Totals of	Each Part of this Form							
55.	Part 1: Total r	real estate, line	2		<b></b>	\$0.00				
56.	Part 2: Total v	vehicles line 5		\$2,600.00						
00.	i dit zi i otai (	· o		ΨΞ,000100						
57.	Part 3: Total p	personal and l	nousehold items, line 15	\$3,400.00						
				4						
58.	Part 4: Total f	inanciai asset	s, line 36	\$1,536.00						
59.	Part 5: Total I	business-relat	ed property, line 45	\$0.00						
60.	Part 6: Total f	farm- and fish	ing-related property, line 52	\$0.00						
0.4										
61.	Part 7: Total	other property	not listed, line 54	+\$0.00						
62.	Total parean	al proporty Ad	d lines 56 through 61	\$7,536.00	Copy personal property total → +	\$7,536.00				
02.	rotal person	ai property. Ad	a iii los so ii ii ougi i o i	Ψ1,000.00	Copy personal property total—7	Ψ1,000.00				
63.	Total of all pr	operty on Sch	edule A/B. Add line 55 + line 62.			\$7,536.00				
		. ,								

					_	
Fill in this information	to identify your case:					
Debtor 1	Debrah		Sarria			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankr	uptcy Court for the:	Ea	stern District of Ne	ew York		
Case number						☐ Check if this is an
(if known)						amended filing
Official Form	. 1060				_	
Official Form	1 1060					
Schedule	C: The Pro	perty You	u Claim a	is Exempt		04/
3e as complete and a	ccurate as possible.	If two married peop	le are filing togethe	er, both are equally res	ponsible for supply	ring correct information. Using the
property you listed on	Schedule A/B: Pro	perty (Official Form 1	06A/B) as your so	urce, list the property t	hat you claim as ex	empt. If more space is needed, fill out a name and case number (if known).
. •	• •	•	•			` ,
						g so is to state a specific dollar amount blicable statutory limit. Some
exemptions—such as	s those for health aid	ds, rights to receive	certain benefits, a	nd tax-exempt retirem	ent funds-may be	e unlimited in dollar amount. However,
ciaim an exemption o exceed that amount, y					oliar amount and tr	he value of the property is determined
				•		
Part 1: Identify	the Property Yo	u Claim as Exem	ıpt			
Which set of ex	emptions are you cl	aiming? Check one	only, even if your sp	ouse is filing with you.		
1.	ning state and federal	nonbankruptcy exem	ptions. 11 U.S.C. §	522(b)(3)		
You are clair	ning federal exemptio	ns. 11 U.S.C. § 522(I	0)(2)			
2. For any propert	y you list on <i>Schedu</i>	le A/B that you clain	n as exempt, fill in t	the information below.		
Brief description of			ent value of the	Amount of the exem	ption you claim	Specific laws that allow exemption
Schedule A/B that lis	sts this property	•	on you own	0 1 1 1		
		, ,	the value from dule A/B	Check only one box fo	or each exemption.	
Brief description:				<b>5</b>		44 11 0 0 0 5 500 ( 1) (0)
2000 Mitsubishi Ecli	pse		\$2,600.00		00.00	11 U.S.C. § 522(d)(2)
Line from				100% of fair mark		
	3.1			,	,	
Brief description:						
Household goods ar	nd furnishings		\$2,500.00	☐ 100% of fair mark	aturalisa sin ta	11 U.S.C. § 522(d)(3)
Line from				√ 100% of fair mark any applicable statement		
Schedule A/B: 6						
	g a homestead exen					
(Subject to adjus	stment on 4/01/22 and	every 3 years after th	nat for cases filed on	or after the date of adju	stment.)	

Official Form 106C

☐ No☐ Yes

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Debior i	Debran		Sarria		Case num	Der (IT Known)
	First Name	Middle Name	Last Name			
Part 2: Additi	ional Page					
Brief description of the property and line on Schedule A/B that lists this property			Current value of the portion you own	Amount of the	exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one l	box for each exemption.	
Brief description:				<b>-</b>		
Electronics			\$400.00	☑	\$400.00	11 U.S.C. § 522(d)(3)
			•		market value, up to	
Line from	_			any applicat	ole statutory limit	
Schedule A/B:						
Brief description:				<b>-4</b>		
Clothes			\$500.00	☑	\$500.00	11 U.S.C. § 522(d)(3)
<u> </u>				☐ 100% of fair	market value, up to	-
Line from				any applicat	ole statutory limit	
Schedule A/B:	11					
Brief description:				<b>—</b>		
JPM Chase			\$1,536.00	☑	\$1,536.00	11 U.S.C. § 522(d)(5)
Checking account	t		Ψ1,000.00	☐ 100% of fair market value, up to		
-				any applicat	ole statutory limit	<u> </u>
Line from	47					-
Schedule A/B:						

Fill	in this information to	identify your case:						
De	ebtor 1	Debrah		Sarria				
		First Name	Middle Name	Last Name				
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name				
Ur	nited States Bankrup	tcy Court for the:	Eas	stern District of New Yor	k			
	ase number _ known)						Check if the amended	
Of	ficial Form	106D						
Sc	chedule D	: Creditor	s Who Ha	ave Claims	Secured	l by Prope	erty	12/15
knov 1. Do S Pa	vn).  any creditors have  No. Check this box  Yes. Fill in all of the  tt 1: List All Se	claims secured by y cand submit this form e information below. ecured Claims ims. If a creditor has	our property?  to the court with you  more than one secu	s, and attach it to this for ur other schedules. You ha	ave nothing else to separately for	, , , ,	s, write your name a	column C Unsecured
	as possible, list the	claims in alphabetica	al order according to	er according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1			Describe the	e property that secures t	he claim:			
	Creditor's Name							
	City  Who owes the del Debtor 1 only Debtor 2 only Debtor 1 and De At least one of th Check if this cla community del  Date debt was ince	State ZIP Code bt? Check one. ebtor 2 only ne debtors and anothe aim relates to a ot	Continge Unliquida Disputed Nature of lie An agree secured Statutory Judgmer	ated I en. Check all that apply. ement you made (such as	mortgage or			
	Date Gebt was Incl	urreu						

Last 4 digits of account number \_\_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

Debtor 1		Debrah		Sarria			Case number (if known)			
		First Name	Middle Name	Name Last Name						
Part 1:		Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any		
2.2			Describe	the property that secure	s the claim:					
	Creditor's Name									
	Deb Deb Deb At le		P Code Unliq Dispution Nature of securing another  Statu	uidated	as mortgage or					
		ebt was incurred	_ ~	(including a right to offset	t)					
	u		Last 4 d	gits of account number						
	Add th	dd the dollar value of your entries in Column A on this page. Write that number here:					\$0.00			
If this is the last page of your form, add there:			orm, add the dollar va	ue totals from all pages.	Write that number		\$0.00			

Fill in this information t	to identify your case:						
Debtor 1	Debrah		Sarria				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankru	ptcy Court for the:	E	Eastern District of New York				
Case number (if known)						Check i	if this is an ed filing
Official Form	106E/F			_			
Schedule E	E/F: Credit	ors Who	Have Unsecured CI	aims			12/15
Part 1: List All of  1. Do any creditors  No. Go to Pa  Yes.  2. List all of your pr identify what type possible, list the c Part 1. If more tha	have priority unsecut 2.  iority unsecured clain of claim it is. If a claim laims in alphabetical can one creditor holds	red claims agains ms. If a creditor han has both priority a priority a priority and		st the creditor sep nd show both prio	rity and no	npriority amou	ints. As much as
					Total claim	Priority amount	Nonpriority amount
Priority Creditor' Number	s Name Street		Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Cheapply.  Contingent	eck all that			
Debtor 1 or Debtor 2 or Debtor 1 ar At least one	,	nother	☐ Unliquidated ☐ Disputed  Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ Taxes and certain other debts you ow government ☐ Claims for death or person injury whi				

Is the claim subject to offset?

☐ No
☐ Yes

Claims for death or person injury while you were intoxicated

Other. Specify

Debtor 1	l Debrah		Sarria Case num	nber (if known)
	First Name	Middle Name	_ast Name	
Part 2	: List All of Your NONPR	IORITY Unsecured	laims	
4. List	Yes.  t all of your nonpriority unsecure decured claim, list the creditor sepon one creditor holds a particular of	n this part. Submit this form ed claims in the alphabe arately for each claim. For	you?  to the court with your other schedules.  cal order of the creditor who holds each claim. If a credit each claim listed, identify what type of claim it is. Do not list in Part 3. If you have more than three nonpriority unsecure	st claims already included in Part 1. If more
				Total claim
4.1	Лтох		Last 4 digits of account number 0523	\$3,443.00
	Amex Ionpriority Creditor's Name		Last 4 digits of account number 9533	
	Po Box 297871		When was the debt incurred? 07/01/2016	
_	lumber Street		As of the date you file, the claim is: Check all the	at apply.
<u>_1</u>	Fort Lauderdale, FL 33329		Contingent	
C	City Sta	te ZIP Code	Unliquidated	
	Who incurred the debt? Check of	one.	☐ Disputed	
	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		Student loans	
	Debtor 1 and Debtor 2 only		<ul> <li>Obligations arising out of a separation agree divorce that you did not report as priority clain</li> </ul>	ment or
	At least one of the debtors and	lanother	Debts to pension or profit-sharing plans, and	
L	☐ Check if this claim is for a co	mmunity debt	similar debts	
	s the claim subject to offset?  No		☑ Other. Specify CreditCard	
	Yes			
4.2	Pouls of Amorica		Lost 4 digito of account number 2420	\$507.00
	Bank of America Ionpriority Creditor's Name		Last 4 digits of account number 2138	· — — — — — — — — — — — — — — — — — — —
	Po Box 982238		When was the debt incurred? 07/01/2016	
_	lumber Street		As of the date you file, the claim is: Check all that	at apply.
ı	El Paso, TX 79998		☐ Contingent	
_	City Sta	ite ZIP Code	Unliquidated	
٧	Who incurred the debt? Check of	one.	Disputed	
5	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		Student loans	
	Debtor 1 and Debtor 2 only		<ul> <li>Obligations arising out of a separation agree divorce that you did not report as priority clain</li> </ul>	ment or
	At least one of the debtors and	another	Debts to pension or profit-sharing plans, and	
	Check if this claim is for a co	mmunity debt	similar debts	otilei
ls	s the claim subject to offset?		✓ Other. Specify	
5	<b>1</b> No		CreditCard	
	Yes			
4.3	Barclays Bank Delaware		Last 4 digits of account number 2100	\$2,102.00
	Ionpriority Creditor's Name		When was the debt incurred? 06/01/2016	•
ı	Po Box 8803		As of the date you file, the claim is: Check all that	et anniv
N	lumber Street		Contingent	а арріу.
_	Wilmington, DE 19899		Unliquidated	
	City Sta		☐ Disputed	
	Who incurred the debt? Check of	one.	Type of NONPRIORITY unsecured claim:	
_	Debtor 1 only		Student loans	
_	Debtor 2 only		<ul><li>Obligations arising out of a separation agree</li></ul>	ment or
_	Debtor 1 and Debtor 2 only		divorce that you did not report as priority clain	
_	At least one of the debtors and		Debts to pension or profit-sharing plans, and	
	Check if this claim is for a co	ommunity debt	similar debts	
	s the claim subject to offset?		Other. Specify	
	<b>Ź</b> ÍNo □ Yes		CreditCard	

Debto	r 1 Debrah	Sarria	Case number (if known)
	First Name M	liddle Name Last Name	· ,
Part	2: Your NONPRIORITY Unsec	cured Claims - Continuation Page	
After	listing any entries on this page, nun	nber them beginning with 4.5, followed by	4.6, and so forth. Total claim
4.4	Capital One	Last 4 digi	s of account number <u>5854</u> \$2,680.00
	Nonpriority Creditor's Name	When was	the debt incurred? 07/01/2016
	15000 Capital One Dr Number Street	As of the d	ate you file, the claim is: Check all that apply.
	Richmond, VA 23238	☐ Contin	gent
	City State	ZIP Code Unliqu	dated
	Who incurred the debt? Check one.	. Dispute	ed .
	Debtor 1 only	•	NPRIORITY unsecured claim:
	Debtor 2 only	☐ Studen	
	Debtor 1 and Debtor 2 only		ions arising out of a separation agreement or
	☐ At least one of the debtors and an	divorce	that you did not report as priority claims
	☐ Check if this claim is for a comm	Debts:	o pension or profit-sharing plans, and other
	Is the claim subject to offset?	Similar	
	✓ No	☑ Other. Credit	
	☐ Yes	Credit	oaiu .
1			o of account number, 2626 \$705.00
4.5	Capital One Nonpriority Creditor's Name	Last 4 digi	s of account number 2636 \$705.00
	15000 Capital One Dr	When was	the debt incurred? <u>07/01/2015</u>
	Number Street		ate you file, the claim is: Check all that apply.
	Richmond, VA 23238	☐ Contin	gent
	City State	ZIP Code Unliqu	dated
	Who incurred the debt? Check one.	. $\Box$ Dispute	od .
	Debtor 1 only	Type of NC	NPRIORITY unsecured claim:
	☐ Debtor 2 only	☐ Studen	loans
	Debtor 1 and Debtor 2 only		ions arising out of a separation agreement or
	☐ At least one of the debtors and an	otrier	that you did not report as priority claims
	☐ Check if this claim is for a comm	nunity debt U Debts similar	o pension or profit-sharing plans, and other
	Is the claim subject to offset?	☑ Other.	
	<b>☑</b> No	Credit	
	Yes		
4.6	Chase Card Services	l ast 4 dini	s of account number 3153 \$5,107.00
	Nonpriority Creditor's Name		the debt incurred? 06/01/2016
	Po Box 15298		ate you file, the claim is: Check all that apply.
	Number Street	Contin	
	Wilmington, DE 19850		
	City State		
	Who incurred the debt? Check one.  Debtor 1 only	'	
	_	••	NPRIORITY unsecured claim:
	Debtor 2 only	☐ Studen	
	Debtor 1 and Debtor 2 only	divorce	ions arising out of a separation agreement or that you did not report as priority claims
	At least one of the debtors and an	Other	o pension or profit-sharing plans, and other
	Check if this claim is for a comr	nunity debt similar	
	Is the claim subject to offset?	<b>₫</b> Other.	
	<b>☑</b> No	Credit	Card
	☐ Yes		

Debto	r 1 Debrah	Sarria	Case number (if known)	
	First Name Middle Name	Last Name	<del></del>	
Part	2: Your NONPRIORITY Unsecured Claims - 0	Continuation Page		
Afte	listing any entries on this page, number them beginnin	g with 4.5, followed by 4.6, and	so forth.	Total claim
4.7	Citibank	Last 4 digits of acco	ount number 0043	\$1,108.00
	Nonpriority Creditor's Name	When was the debt	incurred? 07/01/2016	
	701 East 60th Street North	As of the date you fi	le, the claim is: Check all that apply.	
	Number Street	☐ Contingent	,	
	Sioux Falls, SD 57104 City State ZIP Code	Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed		
	Debtor 1 only	•	TY unsecured claim:	
	Debtor 2 only	Student loans	Ti unscoured diam.	
	Debtor 1 and Debtor 2 only		ng out of a separation agreement or	
	At least one of the debtors and another	— 02.194.101.104.101.	did not report as priority claims	
	Check if this claim is for a community debt	Debts to pension	n or profit-sharing plans, and other	
	Is the claim subject to offset?	similar debts		
	No			
	☐ Yes	CreditCard		
	<u> </u>			\$544.00
4.8	Citibank Nonpriority Creditor's Name	Last 4 digits of acco	ount number 8517	<del>ФЭ44.00</del>
	701 East 60th Street North	When was the debt		
	Number Street	As of the date you fi	le, the claim is: Check all that apply.	
	Sioux Falls, SD 57104	Contingent		
	City State ZIP Code	Unliquidated		
	Who incurred the debt? Check one.	Disputed		
	Debtor 1 only	Type of NONPRIORI	TY unsecured claim:	
	☐ Debtor 2 only	Student loans		
	☐ Debtor 1 and Debtor 2 only		ng out of a separation agreement or	
	☐ At least one of the debtors and another		did not report as priority claims	
	☐ Check if this claim is for a community debt	<ul><li>Debts to pension similar debts</li></ul>	n or profit-sharing plans, and other	
	Is the claim subject to offset?	Other. Specify		
	☑ No	CreditCard		
	☐ Yes			
4.9	Citibankna	Last 4 digits of acco	ount number 9128	\$3,402.00
	Nonpriority Creditor's Name	When was the debt	incurred? 11/01/2017	
	Po Box 769006	As of the date you fi	le, the claim is: Check all that apply.	
	Number Street	☐ Contingent		
	San Antonio, TX 78245 City State ZIP Code	Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed		
	☑ Debtor 1 only	•	TY unsecured claim:	
	☐ Debtor 2 only	☐ Student loans		
	Debtor 1 and Debtor 2 only		ng out of a separation agreement or	
	☐ At least one of the debtors and another		did not report as priority claims	
	☐ Check if this claim is for a community debt		n or profit-sharing plans, and other	
	Is the claim subject to offset?	similar debts		
	✓ No			
	☐ Yes	Uliacculed		

Debto	Debrah	Sarria	Case number (if known)	
	First Name Middle Name	Last Name		
Part	2: Your NONPRIORITY Unsecured Clair	ms - Continuation Page		
After	listing any entries on this page, number them beg	ginning with 4.5, followed by 4.6, and	so forth. Total claim	
4.10	Deptartment Store National Bank/Macy's	Last 4 digits of acco	ount number 0438 \$1,761.0	00
	Nonpriority Creditor's Name	When was the debt	incurred? 02/01/2015	
	Po Box 8218	As of the date you fi	ile, the claim is: Check all that apply.	
	Number Street	☐ Contingent	,	
	Mason, OH 45040 City State ZIP Code	Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed		
	☑ Debtor 1 only	•	ITY unsecured claim:	
	Debtor 2 only	☐ Student loans		
	Debtor 1 and Debtor 2 only		ing out of a separation agreement or	
	At least one of the debtors and another	_ <b>- - - - - - - - - -</b>	did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension	n or profit-sharing plans, and other	
	Is the claim subject to offset?	similar debts		
	✓ No	Other. Specify	•	
	Yes	ChargeAccoun	ı	
	u res		фг 20C 0	·
4.11	Discover Financial	Last 4 digits of acco	ount number <u>8569</u> \$5,206.0	<u> </u>
	Nonpriority Creditor's Name	When was the debt	incurred? <u>10/01/2015</u>	
	Po Box 15316  Number Street	As of the date you fi	ile, the claim is: Check all that apply.	
	Wilmington, DE 19850	Contingent		
	City State ZIP Code	☐ Unliquidated		
	Who incurred the debt? Check one.	Disputed		
	☑ Debtor 1 only	Type of NONPRIOR	ITY unsecured claim:	
	☐ Debtor 2 only	☐ Student loans		
	☐ Debtor 1 and Debtor 2 only		ing out of a separation agreement or	
	☐ At least one of the debtors and another	divorce that you	did not report as priority claims	
	☐ Check if this claim is for a community debt	Debts to pension similar debts	n or profit-sharing plans, and other	
	Is the claim subject to offset?	Other. Specify		
	☑ No	CreditCard		
	☐ Yes			
4.12	Santander Bank	Last 4 digits of acco	ount number, 6006 \$3,997.0	0
	Nonpriority Creditor's Name	When was the debt	<u> </u>	_
	Po Box 841002			
	Number Street	_	ile, the claim is: Check all that apply.	
	Boston, MA 02284	Contingent		
	City State ZIP Code	☐ Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed		
	Debtor 1 only		ITY unsecured claim:	
	Debtor 2 only	Student loans		
	Debtor 1 and Debtor 2 only		ing out of a separation agreement or did not report as priority claims	
	At least one of the debtors and another		n or profit-sharing plans, and other	
	☐ Check if this claim is for a community debt	similar debts	n or profit originity piano, and other	
	Is the claim subject to offset?	✓ Other. Specify		
	<b>☑</b> No	CheckCreditOr	LineOfCredit	
	☐ Yes			

Debtor 1	Debrah		Sarria	Case number (if known)	
	First Name	Middle Name	Last Name	,	
Part 2: You	ur NONPRIORITY L	Jnsecured Claims	- Continuation Pag	de	
After listing	any entries on this pag	e, number them begin	ning with 4.5, followed	by 4.6, and so forth. Total clair	n
4.13 Santa	nder Bank		Last 4 d	igits of account number 3004	\$1,919.00
	ority Creditor's Name			as the debt incurred? 07/01/2016	
	x 841002			e date you file, the claim is: Check all that apply.	
Number			☐ Con		
Bosto Citv	n, MA 02284	State ZIP Code		quidated	
. ,	ncurred the debt? Chec		☐ Disp		
	ebtor 1 only	x one.	·		
				NONPRIORITY unsecured claim: lent loans	
	ebtor 2 only				
	ebtor 1 and Debtor 2 only			gations arising out of a separation agreement or ree that you did not report as priority claims	
	least one of the debtors a			ts to pension or profit-sharing plans, and other	
	neck if this claim is for a	•		ar debts	
	Is the claim subject to offset?  No			er. Specify	
			Cree	ditCard	
Yes	S				
	E/GLELSI		Last 4 d	igits of account number 8581	<u>\$11,000.00</u>
•	ority Creditor's Name		When w	as the debt incurred? <u>12/01/2017</u>	
2401 li Number	nternational Lane		As of the	e date you file, the claim is: Check all that apply.	
			☐ Con	tingent	
City	son, WI 53704	State ZIP Code		guidated	
Who ir	ncurred the debt? Ched	ck one.	☐ Disp	uted	
☑ De	ebtor 1 only		·	NONPRIORITY unsecured claim:	
	ebtor 2 only		• • • • • • • • • • • • • • • • • • • •	lent loans	
	ebtor 1 and Debtor 2 only		_	gations arising out of a separation agreement or	
_	least one of the debtors a		divo	rce that you did not report as priority claims	
	neck if this claim is for a			ts to pension or profit-sharing plans, and other	
	claim subject to offset?	•		ar debts	
<b>☑</b> No	-			er. Specify cational	
☐ Yes	S				

Debtor 1	Debrah		Sarria			Case number (	(if known)
	First Name	Middle Name	Last Name			·	·
Part 4: Add	the Amounts for	r Each Type of Uns	ecured Claim				
	nounts of certain ty ecured claim.	pes of unsecured clain	ns. This information	is for s	tatist	ical reporting purposes only. 28 U.	S.C. §159. Add the amounts for each
						Total claim	
Total claims	6a. Domestic sup	pport obligations		6a.		\$0.00	
from Part 1	6b. Taxes and cel government	e the	6b.		\$0.00		
	6c. Claims for de were intoxicat	hile you	6c.		\$0.00		
	6d. <b>Other.</b> Add all Write that amo	claims.	6d.	+	\$0.00	_	
	6e. <b>Total.</b> Add line	es 6a through 6d.		6e.		\$0.00	
							_
						Total claim	
Total claims	6f. Student loans	5		6f.		\$11,000.00	
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims			6g.		\$0.00	
	6h. Debts to pensother similar	sion or profit-sharing p debts	lans, and	6h.		\$0.00	
	6i. <b>Other.</b> Add all Write that amou	other nonpriority unsecu unt here.	red claims.	6i.	+	\$32,481.00	
	6j. <b>Total.</b> Add line	s 6f through 6i.		6j.		\$43,481.00	

Fill in this information	to identify your case:			
Debtor 1	Debrah		Sarria	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:	Ea	astern District of New York	
Case number				
(if known)				

#### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whom	you hav	e the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	

Fil	I in this information to	identify your case:					
D	Debtor 1	Debrah		Sarria			
		First Name	Middle Name	Last Name			
D	Debtor 2						
(\$	Spouse, if filing)	First Name	Middle Name	Last Name			
U	Inited States Bankrup	otcy Court for the:		Eastern District of New Yor	k		
	Case number _ f known)						Check if this is an amended filing
Oi	fficial Form	106H				_	
S	chedule H	l: Your Co	debtors				12/15
bot	h are equally respor	nsible for supplying	correct information	on. If more space is neede	d, copy the Add	ccurate as possible. If two marı litional Page, fill it out, and num nd case number (if known). An	ber the entries in the boxes on
1.	Do you have any c  ✓ No	odebtors? (If you ar	re filing a joint case	, do not list either spouse as	s a codebtor.)		
	Yes						
2.	•			property state or territory? (hington, and Wisconsin.)	(Community pro	perty states and territories include	e Arizona, California, Idaho,
	✓ No. Go to line 3.						
	Yes. Did your sp	ouse, former spouse	e, or legal equivaler	nt live with you at the time?			
	□No						
	Yes. In which	community state or	territory did you live	9?	Fill i	n the name and current address	of that person.
	Name						
	Number	Street					
	City		State ZIP Code				
3.	codebtor only if th	at person is a guara	antor or cosigner.	•	the creditor on	s filing with you. List the persor Schedule D (Official Form 106 to fill out Column 2.	
	Column 1: Your cod	debtor			C	Column 2: The creditor to whom	you owe the debt
						Check all schedules that apply:	
3.1						Schedule D, line	
	Name					Schedule E/E line	

Official Form 106H Schedule H: Your Codebtors page 1 of 1

Number

City

Street

State

ZIP Code

Schedule G, line \_\_\_\_\_

Fill	in this information to	identify your case:										
D	ebtor 1	Debrah		Sarria	1							
		First Name	Middle Name	Last N	ame		_					
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last N	ame					Check if this is:		
	nited States Bankrupt				trict of New Yo	rk				An amended fili	ng	
	ase number	ioy Court for the.		aotom Dio						☐ A supplement s		
_	known)									chapter 13 inco	me as of t	he following date
								_		MM / DD / YYY	Υ	
Of	ficial Form	106I										
So	chedule I:	 Your Inc	ome									12/15
info spo addi	rmation. If you are n use is not filing with itional pages, write y	narried and not fil you, do not inclu	ing jointly, and your de information abo	r spouse is ut your sp	s living with you ouse. If more s	ı, in pac	clude informa	ation about y	your	ually responsible for spouse. If you are see sheet to this form.	eparated	and your
1.	Fill in your employr information.	ment			Debtor 1					Debtor 2 or non	-filing sp	ouse
	If you have more that	•	Employment status	. [	<b>√</b> Employed □	No	t Employed			☐ Employed ☐ Not E	Employed	
	attach a separate pa		Occupation		Nutrition Coach							
	employers.	accord or	Employer's name	E	Elizabeth Madis	on l	Nutrition					
	Include part time, se self-employed work.		Employer's address	_								
	Occupation may incl or homemaker, if it a	ude student	Employer 5 address	· ±	229-19 Merrick E Number Street	oiva	. #220		_	Number Street		
				-					_			
				-								
				9	Springfield Gard	lens	,	Zip Code		City	State	Zip Code
			How long employed	d there? 3	•		State 2	zip Code		City	State	Zip Code
				_								
Pa	art 2: Give Deta	ils About Mont	hly Income									
	Estimate monthly in are separated.	ncome as of the o	late you file this for	<b>m.</b> If you ha	ave nothing to re	por	t for any line, w	vrite \$0 in the	e spa	ace. Include your non-f	filing spou	se unless you
	•		ore than one employ	er, combine	e the information	for	all employers	for that perso	on on	n the lines below. If you	u need mo	ore space,
	attacina soparate si						For D	ebtor 1		or Debtor 2 or on-filing spouse		
2.	List monthly gross deductions.) If not pa					2.		\$460.00		\$0.00	ı	
3.	Estimate and list m	•	·	<b>5</b>		3.	+	\$0.00	+	\$0.00		
									_	*		
4.	Calculate gross inc	come. Add line 2 +	line 3.			4.		\$460.00	_	\$0.00		

Official Form 106l Schedule I: Your Income page 1

Debtor 1 Debrah Sarria Case number (if known) \_\_ First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse \$460.00 Copy line 4 here.....→ 4. \$0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$39.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5q. Union dues 5g. \$0.00 \$0.00 \$0.00 \$0.00 5h. 5h. Other deductions. Specify: \_ Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$39.00 \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$421.00 \$0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$0.00 \$0.00 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 \$0.00 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: \_ 8f. \$0.00 \$0.00 8g. Pension or retirement income \$0.00 \$0.00 8g. 8h. Other monthly income. Specify: \_ 8h. \$0.00 \$0.00 \$0.00 \$0.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. Calculate monthly income. Add line 7 + line 9. \$421.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 10. \$421.00 \$0.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Contributions to Household Expenses From Partner 11. + Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. \$1,146.00 Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? **✓**No.

Yes. Explain:

Fil	ll in this information to	o identify your case:					
С	Debtor 1	Debrah		Sarria			
		First Name	Middle Name	Last Name	C	Check if this is:	
	Debtor 2	E. AN		L ( N		An amended filin	·
,	Spouse, if filing)	First Name	Middle Name	Last Name		A supplement sh chapter 13 incom	nowing postpetition ne as of the following date:
L	Jnited States Bankrup	otcy Court for the:	Eas	stern District of	New York		
_	Case number if known)					MM / DD / YYYY	<del>7</del>
0	fficial Form	106J					
S	chedule J	: Your Ex	penses				12/15
nee		sheet to this form.			ther, both are equally responsi write your name and case nun		correct information. If more space is nswer every question.
	Is this a joint case						
١.	No. Go to line 2						
	_	 tor 2 live in a separa	ite household?				
	□ No	to: 2 mo m a copare	no nouconola :				
	☐Yes. I	Debtor 2 must file Off	ficial Form 106J-2, <i>E</i>	xpenses for Sep	parate Household of Debtor 2.		
2.	Do you have depe	endents?	√No				
	Do not list Debtor 1 Debtor 2.	1 and	Yes. Fill out this each dependent.		Dependent's relationship to Debtor 1 or Debtor 2	Depende age	ent's Does dependent live with you?
	Do not state the de	pendents' names.					—— □No. □Yes.
							□No. □Yes.
					-		——— UNo. UYes.
							No. Yes.
3.	Do your expenses of people other the your dependents?	an yourself and	<b>√</b> No ☐Yes				
	<u> </u>						
Pa	art 2: Estimate	Your Ongoing M	Ionthly Expense	S			
					ng this form as a supplement ir t the top of the form and fill in t		e to report expenses as of a date after e.
	•		government assista Schedule I: Your Inc	-			Your expenses
4.	The rental or home ground or lot.	e ownership expens	es for your residenc	e. Include first n	nortgage payments and any rent	for the 4.	
	If not included in	line 4:					
	4a. Real estate taxe					4a.	\$0.00
			ocuranca			4b.	\$0.00
		owner's, or renter's in				4c.	
		ance, repair, and upke				4d.	\$0.00
	4d. Homeowner's a	association or condon	ninium dues			ти.	\$0.00

Debtor 1 Debrah Sarria Case number (if known) \_\_\_\_\_\_\_
First Name Middle Name Last Name

First Name Middle Name Last Name		
	You	r expenses
Additional mortgage payments for your residence, such as home equity loans	5.	
Utilities:		
6a. Electricity, heat, natural gas	6a. <u>——</u>	\$125.00
6b. Water, sewer, garbage collection	6b	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$135.00
6d. Other. Specify:	6d	\$0.00
Food and housekeeping supplies	7.	\$200.00
Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$120.00
). Personal care products and services	10.	\$100.00
. Medical and dental expenses	11.	\$70.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol>	12.	\$100.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$40.00
. Charitable contributions and religious donations	14.	\$0.00
<ol> <li>Insurance.</li> <li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li> </ol>		
15a. Life insurance	15a. <u>——</u>	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance	15c	\$257.00
15d. Other insurance. Specify:	15d	\$0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16.	\$0.00
. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	
	17b	
17b. Car payments for Vehicle 2	17c	
17c. Other. Specify:	17d	
17d. Other. Specify:		
<ol> <li>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</li> </ol>	18.	\$0.00
Other payments you make to support others who do not live with you.	46	<b>4</b> 0.0-
Specify:	19.	\$0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

Deb	otor 1	Debrah		Sarria	Case number	Case number (if known)		
		First Name	Middle Name	Last Name				
21.	Other. Spec	ify:			21.	+\$0.00		
22.	Calculate yo	our monthly expen	ses.					
	22a. Add line	es 4 through 21.			22a.	\$1,147.00		
	22b. Copy lii	ne 22 (monthly expe	enses for Debtor 2), if any	; from Official Form 106J-2	22b.	\$0.00		
	22c. Add line	e 22a and 22b. The	result is your monthly exp	penses.	22c.	\$1,147.00		
23.	Calculate ye	our monthly net in	come.					
	23a. Copy lir	ne 12 (your combine	ed monthly income) from	Schedule I.	23a.	\$1,146.00		
	23b. Copy yo	our monthly expens	es from line 22c above.		23b.	<b>-</b> \$1,147.00		
	23c. Subtrac	t your monthly expe	enses from your monthly i	ncome.	(2.22)			
	The re	sult is your <i>monthly</i>	net income.		23c.	(\$1.00)		
24.	For example	e, do you expect to f	inish paying for your car k	ses within the year after you file the pear within the year or do you expect a modification to the terms of your to	t your			
	☐Yes.	IVOITE						

Fill in this information	to identify your case:			
Debtor 1	Debrah		Sarria	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Eastern District of New York		
Case number (if known)				

#### Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00 \$7,536.00 \$7,536.00
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)     Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>+</b> \$43,481.00 \$43,481.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$1,146.00
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J	\$1,147.00

Del	otor 1	Debrah		Sarria		Case number (if known)	)
		First Name	Middle Name	Last Name			
Ра	rt 4: Answe	er These Ques	tions for Administr	ative and Statistica	l Records		
6. <b>A</b>	re vou filina fo	or bankruptcy und	er Chapters 7, 11, or 13?	•			
_	_		-	Check this box and submit	this form to the court wi	th vour other schedules.	
	Yes	3 44 44 4				, , , , , , , , , , , , , , , , , , , ,	
7 V	What kind of de	ebt do you have?					
		-	sumer dehts. Consumer	debts are those "incurred b	v an individual nrimaril	v for a personal	
	family, or ho	usehold purpose."	11 U.S.C. § 101(8). Fill o	ut lines 8-9g for statistical	purposes. 28 U.S.C. §	159.	
	Your debts	are not primarily o	consumer debts. You ha	ve nothing to report on this	part of the form. Chec	k this box and submit	
	this form to	the court with your	other schedules.	0 1	•		
				opy your total current mon	thly income from Officia	al	_
F	orm 122A-1 Lir	ne 11; <b>OR</b> , Form 12	2B Line 11; <b>OR</b> , Form 12	22C-1 Line 14.			<u>\$956.00</u>
9. <b>C</b>	opy the follow	ing special catego	ories of claims from Par	t 4, line 6 of Schedule E/F	:		
						Total claim	
	From Part 4	on Schedule E/F. o	copy the following:				
	9a Domestic	support obligations	(Conv line 6a.)			\$0.00	
	ca. Bornoodo	oapport obligations	(Copy in io ca.)			ψο.σσ	
	Ob. Taxaaa aaad	and the other delete		(O (b Ob-)		<b>#0.00</b>	
	9b. Taxes and	certain other debts	you owe the government	(Copy line ob.)		\$0.00	
	9c. Claims for	death or personal i	njury while you were into	xicated. (Copy line 6c.)		\$0.00	
	9d. Student loa	ans. (Copy line 6f.)				\$11,000.00	
	9e.Obligations	arising out of a se	paration agreement or di	vorce that you did not rep	ort as priority	\$0.00	
	claims. (Co						
	9f. Debts to pe	ension or profit-sha	ring plans, and other sim	ilar debts. (Copy line 6h.)		+ \$0.00	
					Г	<u> </u>	Í
	Oa Tatal Asia	Llinga Ca through C	£			Ø44 000 00	
	eg. Iotal. Add	l lines 9a through 9	1.			\$11,000.00	

Debtor 1	Debrah		Sarria	
	First Name	Middle Name	Last Name	
Debtor 2	F:	Add I II Al		
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:	Ea	astern District of New York	
Case number				☐ Check if this is a
(if known)				amended filing

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
you pay or agree to pay someone who is N	OT an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
der penalty of perjury, I declare that I have re	ead the summary and schedules filed with this declaration and that they are true and correct.
der penalty of perjury, I declare that I have re	ead the summary and schedules filed with this declaration and that they are true and correct.
der penalty of perjury, I declare that I have re	ead the summary and schedules filed with this declaration and that they are true and correct.
der penalty of perjury, I declare that I have re	
,	ead the summary and schedules filed with this declaration and that they are true and correct.
/s/ Debrah Sarria Debrah Sarria, Debtor 1	X
/s/ Debrah Sarria	

ebtor 1	Debrah		Sarria				
-	First Name	Middle Name	Last Name				
ebtor 2	Fig. (A)		L N				
nited States Bankrupt	First Name	Middle Name	Last Name astern District of N	Jour York			
ase number	cy Court for the.		astern District or r	New TOTK		☐ Check if this is a	n
known)						amended filing	
ficial Form	107						
atement (	of Financ	ial Affair	s for Indi	ividuals Filin	g for Bank	cruptcy	
ed, attach a separa	te sheet to this form	n. On the top of any	y additional pages	er, both are equally respor , write your name and case			<i></i>
1. Civo Dotoi		Marital Status a		ı Lived Before			
t I. Give Detai	Is About Your N	viai itai Status t	and Where You	20.0.0			
		varitar Status t	and Where You	2.000 2010.0			
What is your currer  Married		varitar Status e	and Where You	2000 2010.0			
What is your currer  Married  Not married  During the last 3 year	nt marital status?						
What is your currer  Married  Not married  During the last 3 year  No  Yes. List all of the	nt marital status? ars, have you lived a	anywhere other tha the last 3 years. Do	in where you live n	n <b>ow?</b> /ou live now.			
What is your currer Married Mot married During the last 3 year	nt marital status? ars, have you lived a	anywhere other tha the last 3 years. Do	n where you live not include where yes Debtor 1 lived	iow?		Dates Debtor there	2 lived
What is your currer  Married  Not married  During the last 3 year  No  Yes. List all of the	nt marital status? ars, have you lived a	anywhere other that the last 3 years. Do	n where you live not include where yes Debtor 1 lived	n <b>ow?</b> /ou live now.			
What is your currer  ☐ Married  ☑ Not married  During the last 3 yea  ☑ No ☐ Yes. List all of the  Debtor 1:	nt marital status? ars, have you lived a	anywhere other that the last 3 years. Do	n where you live not include where yes Debtor 1 lived	now?  //ou live now.  Debtor 2:  Same as Debtor 1		there  Same as De	
What is your currer  ☐ Married  ☑ Not married  During the last 3 yea  ☑ No ☐ Yes. List all of the  Debtor 1:	nt marital status? ars, have you lived a	anywhere other that the last 3 years. Do Date ther	n where you live not include where yes Debtor 1 lived	you live now.  Debtor 2:		there  Same as De	
What is your currer  Married  Not married  Ouring the last 3 year  No  Yes. List all of the  Debtor 1:	nt marital status? ars, have you lived a	anywhere other that the last 3 years. Do Date there	n where you live not include where yes Debtor 1 lived	now?  //ou live now.  Debtor 2:  Same as Debtor 1	State ZIP Co	there  Same as De From To	
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Mhat is your currer  Married  Not married  During the last 3 year  No  Yes. List all of the  Debtor 1:	ars, have you lived a	anywhere other that the last 3 years. Do  Date there  From To	n where you live not include where yes Debtor 1 lived	now?  /ou live now.  Debtor 2:  Same as Debtor 1  Number Street	State ZIP Co	there  Same as De From To  de  Same as De	btor 1
Mhat is your currer  Married  Mot married  During the last 3 year  No  Yes. List all of the  Debtor 1:  Number Street	ars, have you lived a	anywhere other that the last 3 years. Do  Date there  From To  P Code  From	n where you live not include where yes Debtor 1 lived	Debtor 2:  Same as Debtor 1  Number Street  City	State ZIP Co	there  Same as De From To	btor 1
What is your currer  Married  Not married  During the last 3 year  No  Yes. List all of the  Debtor 1:  Number Street	ars, have you lived a	anywhere other that the last 3 years. Do  Date there  From To	n where you live not include where yes Debtor 1 lived	Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1	State ZIP Co	there  Same as De From To  ode  Same as De	btor 1
What is your currer  Married  Not married  During the last 3 year  No  Yes. List all of the  Debtor 1:	ars, have you lived a	anywhere other that the last 3 years. Do  Date there  From To  P Code  From To	n where you live not include where yes Debtor 1 lived	Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1	State ZIP Co	there  Same as De  From To  Same as De  From To To	btor 1

Official Form 107

Case 1-19-45554-cec Doc 1 Filed 09/17/19 Entered 09/17/19 10:46:11 Debtor 1 Debrah Sarria Case number (if known) \_\_\_\_ First Name Middle Name Last Name Part 2: Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross Income** Sources of income **Gross Income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) **✓** Wages, commissions, ■ Wages, commissions, From January 1 of current year until the \$963.00 bonuses, tips bonuses, tips date you filed for bankruptcy: Operating a business Operating a business ✓ Wages, commissions, For last calendar year: ■ Wages, commissions, \$2,418.00 bonuses, tips bonuses, tips (January 1 to December 31, 2018 Operating a business Operating a business **✓** Wages, commissions, For the calendar year before that: Wages, commissions, \$3.592.00 bonuses, tips bonuses, tips (January 1 to December 31, 2017 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. **√** No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from each Sources of income Gross Income from each source source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2018 For the calendar year before that:

(January 1 to December 31, 2017

Debtor 1 Debrah Sarria Case number (if known) \_ First Name Middle Name Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. ☑Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ■ Mortgage Car Creditor's Name ☐ Credit card Loan repayment Number Street ☐ Suppliers or vendors Other\_ City State ZIP Code 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. **√**No Yes. List all payments to an insider. Dates of Total amount paid Amount you still owe Reason for this payment payment Insider's Name Number Street ZIP Code City State

Case 1-19-45554-cec

Doc 1

Filed 09/17/19

Entered 09/17/19 10:46:11

Debtor 1 Debrah Sarria Case number (if known) \_ First Name Middle Name Last Name 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. **√**No Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still owe Reason for this payment payment Include creditor's name Insider's Name Number Street ZIP Code City State Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. **√**No Yes. Fill in the details. Nature of the case Court or agency Status of the case Pending Case title \_ On appeal Court Name ☐ Concluded Number Street Case number City ZIP Code State 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. State ZIP Code City

Case 1-19-45554-cec

Doc 1

Filed 09/17/19

Entered 09/17/19 10:46:11

Debtor 1 Debrah Sarria Case number (if known) \_ First Name Middle Name Last Name 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **√**No Yes. Fill in the details. Describe the action the creditor took Date action was **Amount** taken Creditor's Name Number Street City State ZIP Code Last 4 digits of account number: XXXX-\_\_\_\_\_\_\_ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ✓ No Yes List Certain Gifts and Contributions Part 5: 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? **√**No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Value Describe the gifts Dates you gave the gifts person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you \_ 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **√**No Yes. Fill in the details for each gift or contribution.

Case 1-19-45554-cec

Doc 1

Filed 09/17/19 Entered 09/17/19 10:46:11

Case 1-19-45554-cec Doc 1 Filed 09/17/19 Entered 09/17/19 10:46:11 Debrah Sarria Case number (if known) \_ First Name Middle Name Last Name Gifts or contributions to charities that Describe what you contributed Date you Value total more than \$600 contributed Street State ZIP Code List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your loss Value of property lost how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made

Person Who Was Paid Number Street ZIP Code City State Email or website address

Person Who Made the Payment, if Not You

Debtor 1

Charity's Name

Number

City

**√**No

Part 7:

**√**No

Debtor 1 Debrah Sarria Case number (if known) \_\_\_ Middle Name First Name Last Name 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **✓** No Yes. Fill in the details. Description and value of any property transferred Date payment or **Amount of payment** transfer was made Person Who Was Paid Number Street ZIP Code City State 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **√**No Yes. Fill in the details. Date transfer was Description and value of property Describe any property or payments received transferred or debts paid in exchange made Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you \_ 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **√**No Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust \_

Doc 1 Filed 09/17/19 Entered 09/17/19 10:46:11

Case 1-19-45554-cec

Case 1-19-45554-cec Doc 1 Filed 09/17/19 Entered 09/17/19 10:46:11 Debtor 1 Debrah Sarria Case number (if known). First Name Middle Name Last Name Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance instrument closed, sold, moved, or before closing or transferred transfer Name of Financial Institution XXXX-\_ ☐ Checking ■ Savings Number Street ■ Money market Brokerage Other \_ City State **ZIP Code** 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? **√**No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? □No Name of Financial Institution Name ☐ Yes Number Street Number Street City State **ZIP Code** City State ZIP Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? **√**No Yes. Fill in the details. Do you still have Who else has or had access to it? Describe the contents it? ■ No Name of Storage Facility Name Yes Number Street Number Street City State **ZIP Code** 

**ZIP Code** 

City

Debtor 1 Debrah Sarria Case number (if known) \_ Middle Name First Name Last Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **√**No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number City State **ZIP Code** City **ZIP Code** Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Date of notice Governmental unit Environmental law, if you know it Name of site Governmental unit Number Street Number Street City **ZIP Code** City State **ZIP Code** 25. Have you notified any governmental unit of any release of hazardous material? **√**No Yes. Fill in the details. Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 9

Case 1-19-45554-cec

Doc 1

Filed 09/17/19 Entered 09/17/19 10:46:11

otor 1	Debrah		Sarria		Case number (if known)	
	First Name	Middle Name	Last Name			
		Governme	ental unit	Environmental	law, if you know it	Date of notice
Name of site	e	Government	al unit	_		
Number	Street	Number	Street	_		
		City	State ZIP Code	_		
City	State Z	IP Code				
	been a party in any	/ judicial or administrati	ve proceeding under an	y environmental law	? Include settlements and orders	<b>5.</b>
✓ No	in the details.					
L les. Fill	iii tile details.	Court or o	aonov.	Nature of the c	000	Status of the case
		Court or a	gency	nature of the c	ase	Status of the case
Case title _				_		Pending
		Court Name				On appeal
				_		☐Concluded
		Number	Street			
Case number	er	City	State ZIP Code			
			Connections to An			
	·		ou own a business or hat ofession, or other activity,	-	ng connections to any business	?
			r limited liability partnersh		rune	
	partner in a partners		71	,		
☐ An	officer, director, or r	nanaging executive of a	corporation			
☐ An	owner of at least 5%	6 of the voting or equity s	ecurities of a corporation			
✓No. Non	ne of the above appli	es. Go to Part 12.				
		ove and fill in the details b	elow for each business.			
			the nature of the busine	ess	Employer Identification number	
Name					Do not include Social Security	
					EIN:	
Number	Street	Name of	accountant or bookkeep	oer	Dates business existed	
		- Hame of	association booknes			
					FromTo	
City	State Z	IP Code				

1	Debrah	Middle Narra	Sarria	Case number (if known)
	First Name	Middle Name	Last Name	
ithin 2 ner par		led for bankruptcy, did y	ou give a financial statement to a	anyone about your business? Include all financial institutions, credi
No				
	I in the details below	ı		
100.11	THE GOLDING BOIOW	Date iss		
		Date iss	uea	
ne				
		, 55,		
mber	Street			
	04:4:	7ID 0 . I		
'	State	ZIP Code		
e read t	derstand that makii	ng a false statement, co	oncealing property, or obtaining n	I I declare under penalty of perjury that the answers are true and noney or property by fraud in connection with a bankruptcy case
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e read t	he answers on this derstand that makin fines up to \$250,00	ng a false statement, co	oncealing property, or obtaining n	noney or property by fraud in connection with a bankruptcy case
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e read to ct. I undersult in Signation Date	he answers on this derstand that making fines up to \$250,000  /s/ Deture of Debrah Sarria  09/17/2019  ch additional pages  or agree to pay sor	ng a false statement, co 0, or imprisonment for u brah Sarria a, Debtor 1  s to your Statement of F	spring property, or obtaining mup to 20 years, or both. 18 U.S.C. §  Signature of  Date  Financial Affairs for Individuals F	noney or property by fraud in connection with a bankruptcy case \$\frac{1}{2}\$ 152, 1341, 1519, and 3571.

Fill in this information	to identify your case:			
Debtor 1	Debrah		Sarria	
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse, if filing)	First Name	Middle Name	Last Name	
nited States Bankru	uptcy Court for the:	Ea	stern District of New York	
Case number f known)				

## Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7

12/15

Check if this is an amended filing

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a Did you claim the property as

t? exempt on Schedule C?

Debtor 1	Debrah	Sarria	Case number (if known)
	First Name	Middle Name Last Name	
Part 2: Lis	t Your Unexpired	Personal Property Leases	
below. Do not	list real estate leases	ty lease that you listed in Schedule G: Executory Contracts and a Unexpired leases are leases that are still in effect; the lease period assume it. 11 U.S.C. § 365(p)(2).	
Describe y	your unexpired person	nal property leases	Will the lease be assumed?
Lessor's na	me:		☐ No
			☐ Yes
Description property:	n of leased		
Lessor's na	me:		☐ No
Description property:	n of leased		☐ Yes
Lessor's na	me:		☐ No
			☐ Yes
Description property:	n of leased		_
Lessor's na	me:		☐ No
Description property:	n of leased		☐ Yes
Lessor's na	me:		☐ No
Description property:	n of leased		Yes
Lessor's na	me:		☐ No
Description property:	n of leased		☐ Yes
Lessor's na	me:		☐ No
			☐ Yes
Description property:	n of leased		
Part 3: Sig	n Below		
Under pena	lty of periury I declar	e that I have indicated my intention about any property of my est	tate that secures a debt and any personal property that
	an unexpired lease.	, , , , , , , , , , , , , , , , , , , ,	
X	/s/ Debrah S	X	
Signature o		Signature of Debtor 2	
Signature C	DODIO! 1	- 3	
Date <u>09/17</u>	7/2019	Date	
MM/	DD/ YYYY	MM/ DD/ YYYY	

B2030 (Form 2030)(12/15)

# United States Bankruptcy Court Eastern District of New York

In i	re					
Saı	ırria, Debrah	Case No.				
Del	ebtor(s)	Chapter <b>7</b>				
	DISCLOSURE OF COMPENSATION OF AT	TORNEY FOR DEBTOR				
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I compensation paid to me within one year before the filing of the petition rendered or to be rendered on behalf of the debtor(s) in contemplation of contemplation.	in bankruptcy, or agreed to be paid to me, for service				
	For legal services, I have agreed to accept					
	Prior to the filing of this statement I have received	\$1,400.00				
	Balance Due	\$0.00				
2.	The source of the compensation to be paid to me was:					
	☑ Other (specify)					
3.	The source of compensation to be paid to me is:					
	☑ Other (specify)					
4.	☐ I have not agreed to share the above-disclosed compensation with an of my law firm.	y other person unless they are members and associates				
	☑ I have agreed to share the above-disclosed compensation with another of my law firm. A copy of the agreement, together with a list of the names					
	Payment of no more than \$250 to per diem attorney appearing at 341 mee					
5.	In return for the above-disclosed fee, I have agreed to render legal service	e for all aspects of the bankruptcy case, including:				
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to bankruptcy;</li> </ul>					
	Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;					
	c. Representation of the debtor at the meeting of creditors and confirmat	ion hearing, and any adjourned hearings thereof;				
6.	By agreement with the debtor(s), the above-disclosed fee does not include Adversary proceedings.	e the following services:				
	CERTIFICATION					
	I certify that the foregoing is a complete statement of a payment to me for representation of the debtor(s) in this b					
	09/17/2019 /s/ Jacqueline Torchin	n-Carey				
	Date Signature of Attor					
		Jacqueline Torchin-Carey Bar Number: 5107 Jacqueline Torchin, P.C.				

Jacqueline Torchin, P.C. Name of law firm

200 Park Ave Ste 1700 New York, NY 10166-0005 Phone: (800) 541-0635

Case 1-19-45554-cec Doc 1 Filed 09/17/19 Entered 09/17/19 10:46:11 Check one box only as directed in this form and in Form Fill in this information to identify your case: 122A-1Supp: Debtor 1 Debrah Sarria ☑ 1. There is no presumption of abuse. First Name Middle Name Last Name 2. The calculation to determine if a presumption of Debtor 2 (Spouse, if filing) First Name Middle Name Last Name abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2). United States Bankruptcy Court for the: **Eastern District of New York** 3. The Means Test does not apply now because of Case number qualified military service but it could apply later. (if known) Check if this is an amended filing Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. ☐ Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Column A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll \$230.00 deductions). Alimony and maintenance payments. Do not include payments from a spouse if Column B is \$0.00 filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on \$0.00 line 3. Net income from operating a business, profession, Debtor 2 Debtor 1 Gross receipts (before all deductions) \$0.00 Ordinary and necessary operating expenses \$0.00 Conv \$0.00 Net monthly income from a business, profession, or farm here \$0.00 6. Net income from rental and other real property Debtor 1 Debtor 2 Gross receipts (before all deductions) \$0.00 Ordinary and necessary operating expenses \$0.00 Copy \$0.00 Net monthly income from rental or other real property here \$0.00 \$0.00 7. Interest, dividends, and royalties

Case 1-19-45554-cec Doc 1 Filed 09/17/19 Entered 09/17/19 10:46:11 Debtor 1 Debrah Sarria Case number (if known) \_ First Name Middle Name Last Name Column A Column B Debtor 1 Debtor 2 or non-filing spouse \$0.00 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you..... \$0.00 For your spouse..... \$0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Income from All Other Sources-contribution from partner \$726.00 Total amounts from separate pages, if any. \$956.00 \$956.00 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. **Total current** monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11..... Copy line 11 here → \$956.00 Multiply by 12 (the number of months in a year).  $\mathbf{x} 12$ 12b. The result is your annual income for this part of the form. \$11,472.00 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. New York Fill in the number of people in your household. \$55,333.00 Fill in the median family income for your state and size of household...... To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. ☑Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Debrah Sarria	X
Signature of Debtor 1	Signature of Debtor 2
Date <b>09/17/2019</b>	Date
MM/DD/YYYY	MM/DD/YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

# IN THE UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK BROOKLYN DIVISION

IN RE:	Sarria, Debrah		CASE NO
			CHAPTER 7
		VERII	FICATION OF CREDITOR MATRIX
The a	above named Debtor h	nereby verifies that the attached	list of creditors is true and correct to the best of his/her knowledge.
Date	09/17/2019	Signature	/s/ Debrah Sarria
			Debrah Sarria, Debtor

### Amex

Po Box 297871 Fort Lauderdale, FL 33329

### Bank of America Po Box 982238 El Paso, TX 79998

Barclays Bank Delaware Po Box 8803 Wilmington, DE 19899

Capital One 15000 Capital One Dr Richmond, VA 23238

Chase Card Services Po Box 15298 Wilmington, DE 19850

Citibank 701 East 60th Street North Sioux Falls, SD 57104

Citibankna Po Box 769006 San Antonio, TX 78245

Deptartment Store National Bank/Macy's Po Box 8218 Mason, OH 45040 Discover Financial Po Box 15316 Wilmington, DE 19850

Santander Bank Po Box 841002 Boston, MA 02284

USDOE/GLELSI 2401 International Lane Madison, WI 53704